



Dear Vendor,

Your support for the Massachusetts School Nurse Organization is both vital and appreciated. As we prepare for our Annual Fall Conference on October 31, 2009, we are amending our vendor sponsorship procedure as required. MSNO is aware of the compliance required by vendors per 105 CMR 970.000, the implementing regulation for M.G.L. c. 111N, Pharmaceutical and Medical Device Manufacturer Conduct, as enacted under Chapter 305 of the Acts of 2008, An Act To Promote Cost Containment, Transparency and Efficiency in the Delivery of Quality Health Care. These requirements, restrictions and prohibitions establish ground rules for interactions between the pharmaceutical and medical device industry and health care providers.

MSNO appreciates your past support and understands that the following are prohibited: gifts of entertainment or recreation and meals in conjunction with entertainment or recreation; complimentary items such as pens, mugs, calendars, etc.; and meals provided to health care providers outside of a practitioner's office or hospital setting. ***Donations to the organization's continuing education conference are acceptable providing that they are not meant to influence the prescribing patterns or other medical decisions of the organization.*** MSNO will remain responsible for the content, selection of speakers, and distribution of monies for its conference.

Your contribution to the general fund that supports the MSNO Fall Conference on October 31, 2009, will be greatly appreciated. This year our venue is the Doubletree Westborough/Boston in Westborough MA 01581 from 7:30 am to 3:00 pm. The vendor space is exceptional; it is one of the key reasons MSNO has selected this location. The donation schedule is below; checks are payable to "MSNO" and mailed to me, Jane Kisielius, Vendor Coordinator. Please include the **Vendor Confirmation Form** with your check. Vendor floor assignments are determined by first-come first-served receipt of your check at each level of sponsorship. Your donations will be recognized in our conference program packet. Three levels of sponsorship are outlined below:

Gold Sponsor

- ***For Profit Vendor \$501-\$1000 donation, no table donation requested***

Silver Sponsor

- ***For Profit Vendor \$250 -\$500 donation, table donation of \$250 is requested***

Bronze Sponsor

- ***Non-Profit Vendors , Information Vendors, table donation of \$50 is requested***
Selling products or services from which the proceeds are donated
Offering handouts/products that promote their service and/or mission

MSNO is looking forward to working with you at our Fall Conference on Saturday, October 31, 2009 at the Doubletree Hotel, Westborough MA. **If you are interested in joining us, please notify me by e-mail, fax or mail as soon as possible but no later than Oct.15, 2009.**

Sincerely,

Jane Kisielius RN MS MSNO Vendor Coordinator
Coordinator, Health Services, Quincy Public Schools
70 Coddington Street. Quincy, Massachusetts 02169
Phone 617-984-8899 Fax 617-984-8600
janekschoolnl@gmail.com

MSNO Conference Vendor Guidelines

Vendor Categories

- **Gold Sponsor** *\$501-\$1000 donation, no table donation requested*
For-profit companies/organizations
- **Silver Sponsor** *\$250-\$500 Donation, table donation of \$250 is requested*
For-profit companies/organizations
- **Bronze Sponsor** *\$50.00 table donation is requested*
Selling products or services from which the proceeds are donated
Offering handouts/products that promote their service and/or mission

Vendors will be assigned their table placement upon receipt of their donation.

- Vendors will be notified of upcoming conferences (spring and fall) at least three months prior to the scheduled event by the VP of Programs and/or the Vendor Coordinator. Vendors will receive Vendor Guidelines at the time of notification of the conference schedule.
- Receipt of the confirmation form will confirm level of sponsorship. Receipt of vendor fee will confirm vendor location within their respective category. First-come, first served will apply to both sponsor category and receipt of vendor fee. All Gold sponsors will be placed before Silver vendors, and Silver before Bronze, respectively.
- **Vendor Confirmation Form** (attached) will include name and contact information of the company, number of tables and chairs needed, electrical source (if needed), and any other requests.
- Any Vendor issues should be brought to the attention of the Program Vice-President and the MSNO President for resolution. Our Vendors are important supporters for MSNO, and we want them to have a positive vending opportunity.
- Vendors will be asked to fill out a Conference Evaluation on the day of the Conference with comments and suggestions .
- All Vendors **must take everything** with them when they leave the Conference facility.

Revised
August 2009



VENDOR CONFIRMATION FORM

Vendor (Company Name/Organization)

Contact Person Name/Title

E mail: **Phone:** **Fax:**

Vendor Fee: Please indicate your donation in the box provided. (Vendors receive table placement in the order that they are received and paid in full)

Gold Sponsor (No table fee) \$

- For Profit \$501-\$1000 donation

Silver Sponsor (Per table fee) \$

- For Profit Number of tables ___ X \$250 =

Bronze Sponsor (Per table fee) \$

- Donates proceeds or
- Information only

Total Sponsorship \$

THANK YOU

Additional Information

Chairs needed # Electrical outlet needed? Yes No

Is an invoice required? _____ Send to: _____

Vendor Coordinator Jane Kisielius RN MS
 Address 70 Coddington Street
 Quincy, Massachusetts 02169
 Email janekschoolnl@gmail.com
 Phone 617-984-8899
 Fax 617-984-8600

Date (form) received _____
 Date (check) received _____
 Order received (Gold) _____
 Order received (Silver) _____
 Order received (Bronze) _____